



PUBLIC HEALTH CONNECTIONS

August – 2007 Volume 7, Issue 91

Office of Local and Rural Health



Roderick L. Bremby, Secretary

Kathleen Sebelius, Governor

WHAT'S INSIDE

WHAT IS PUBLIC HEALTH?	1
COLLABORATIVE LEADERSHIP	2
COUNCIL OF STATE AND TERRITORIAL EPIDEMIOLOGISTS	3
ENVIRONMENTAL PUBLIC HEALTH MAPPING	3
EMERGENCY HAND CRANK AM/FM RADIO/FLASHLIGHT/CHARGER	4
KRHIS SURVEY	4
CORE TRAINING	5
END OF THE ROAD	5
RETIRING AFTER 15 YEARS IN PUBLIC HEALTH	6
KPHLI SEEKING NEW APPLICANTS	6
SILENT AUCTION TO AID GREENSBURG	7
KPHA ANNUAL FALL CONFERENCE	7
PART-TIME HIV/STD NURSE	8
LOCAL HEALTH SECTION	9

WHAT IS PUBLIC HEALTH?

*submitted by the Office of Local and Rural Health
Kansas Department of Health and Environment*

To promote awareness of the Core Functions and Essential Services of Public Health, Connections will be highlighting an Essential Service of the month by utilizing "What is Public Health?" An Orientation to the Public Health System for Participants and Spectators. **Click on the logo** to download the completed document.

Essential Service #5: Develop policies and plans that support individual and community health efforts.

This service requires leadership development at all levels of public health; systematic community-level and state-level planning for health improvement in all jurisdictions; development and tracking of measurable health objectives as a part of continuous quality improvement strategies; joint evaluation with the medical health care system to define consistent policy regarding prevention and treatment services; and development of codes, regulations and legislation to guide the practice of public health.

The following provides a sample of the activities performed under this service that impact the public's health: Deliver essential public health services to the entire community; Establish and maintain effective community partnerships and appropriate working relationships with governing entities; Establish and implement a strategic community health improvement plan and assess and evaluate it on an ongoing basis; Educate the community about health goals and objectives that have been established; Coordinate services with the state public health system and community health care partners.

Professionals who provide these services include the agency administrator, local board of health members, director of nursing/community services and medical director; All program coordinators/supervisors, epidemiologists, public health nurses, public health educators, community relations director, quality improvement and safety committee members.



Questions to ask yourself to help determine if you/your agency perform functions that contribute to Essential Service #5:

- ☐ Do I/my agency develop and/or implement policies and plans that will improve the health of the community?
- ☐ Do I/my agency interact with and promote positive working relationships with area community health care providers?
- ☐ Do I/my agency establish or participate in community partnerships?
- ☐ Do I/my agency establish and track measurable health objectives as a part of the continuous quality improvement process?

If you/your agency is **not** checking one of the boxes, how will you assure that this essential service is provided in your community, and how do we as public health professionals work to fulfill that mission in the daily performance of our duties and responsibilities?

COLLABORATIVE LEADERSHIP

*submitted by Debbi Baugher
Labette County Health Dept Administrator*



Collaboration is a word frequently heard in the public health arena since Sept. 11, 2001. This catastrophic event sparked the effort to increase preparedness among all responders, including public health leaders. Many current administrators remember a time when they were not involved, or maybe had little involvement, in preparedness planning with "partners" in the community.

Collaboration is synonymous with words like teamwork, partnership, group effort, association, alliance, relationship and cooperation. Although none of these words are new to us, as leaders they may threaten our leadership skills and type. Developing oneself to be a collaborative leader may be challenging; requiring much change and effort to create a new leadership style.

Six key practices unique to leading a collaborative process have been identified by Turning Point Leadership Development National Excellence Collaborative. The elements are keys to the process of collaborative leadership and support each other to develop the picture of essential skills.

Assessing the Environment: One should develop the ability to recognize common interests of others and also recognize and understand that others may have a different point of view. Goals should be developed after the group has been heard from, including personal views and purposes for the goals. A collaborative leader should pull all of the group ideas together to form a change that will be beneficial to all. Priorities should be set and obstacles and barriers that may prevent them from developing should be identified.

Creating Clarity: Collaborative leaders seem to make clear their purpose. They exhibit commitment to a way of doing things. The leaders facilitate others to gain self-confidence and then aspire to take action in any situation. Developing group focus can lead to an increase in power. Generating a shared vision within the group can be inspirational.

Building Trust: A collaborative leader will not overlook the need to promote and sustain trust within the group. If the leader fails to create trust among the workers, involvement will decrease resulting in a lack of shared ideas and new, innovative approaches not being shared.

Sharing Power and Influence: The American society rewards individuals for achievement which may be the reason many leaders cannot share power and influence. However, collaboration is not achieved alone. The definition of collaboration gives no indication that an individual can attain this. Engaging the whole team in the decision-making process creates the feeling of power within the group and encourages contributions to the process. Goals are usually accomplished through the efforts of the group not just the leader. Leaders must see that sharing power generates power.

Developing People: A leader must have a genuine concern for bringing out the best in people, utilize other people's talents and resources to the maximum, build the power by sharing the power, and relinquish control. The potential of workers must be realized and promoted. Serving as a coach or mentor facilitates the creation of power which may lead to increased leadership skills and confidence building through experimentation, goal-setting and performance feedback.

Self-Reflection: Collaborative leaders are personally mature but must examine their values and assess their behavior for likeness of these values if they are to lead a successful collaborative process. Verbal and nonverbal communication must be considered when analyzing the impact of actions and words on the group.

and the achievement of goals. "Great collaborative leaders have the ability to recognize the impact of their behavior and adjust accordingly."

As leaders in public health it continues to be important to gain and sharpen leadership skills. As funding continues to decline yearly it is imperative that we make the most efficient use of our financial and human resources. As leaders we must learn to delegate duties to co-workers and then concentrate on teaching them the necessary skills to perform the function to the maximum.

Also of importance will be making the best use of each workers skills and time. Creative thinking will be essential to create a functional yet professional workforce. Assessing and validating the usefulness and need of each and every service will be necessary. Again, as leaders we are charged with the duty to be collaborative leaders and share the power and influence to generate power.

COUNCIL OF STATE AND TERRITORIAL EPIDEMIOLOGISTS

*submitted by Gail Hansen, DVM
State Epidemiologist*

Kansas Department of Health & Environment

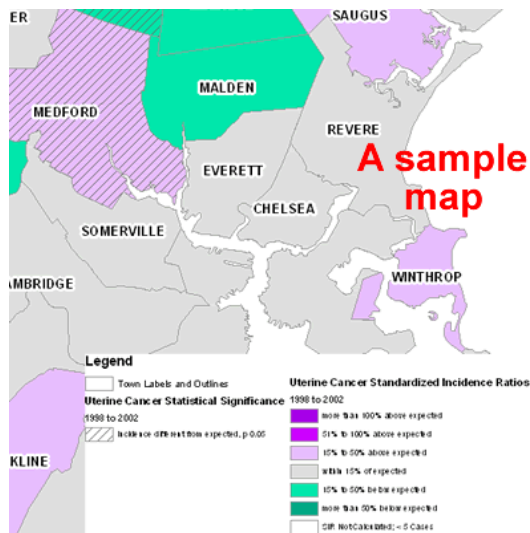


Gail Hansen, DVM, Kansas State Epidemiologist, was elected the infectious disease chair of the Council of State and Territorial Epidemiologists (CSTE) at its annual conference in June. It is a three-year term and holds a spot on the CSTE Executive Board. Specific topics that the infectious disease chair addresses with epidemiologists and public health professionals around the country include: antimicrobial resistance, emerging infectious diseases (including bioterrorism agents), immunizations and vaccine preventable diseases, HIV, nosocomial infections, STDs, TB, viral hepatitis and zoonotic diseases.

CSTE is a professional association of over 1,050 public health epidemiologists working in states, local health agencies, and territories. CSTE works to establish more effective relationships among state and other health agencies. It also provides technical advice and assistance to partner organizations, such as the Association of State and Territorial Health Officials (ASTHO), and to federal public health agencies such as the Centers for Disease Control and Prevention (CDC). CSTE members have surveillance and epidemiology expertise in a broad range of areas including occupational health, infectious diseases, immunization, environmental health, chronic diseases, injury control, and maternal and child health. More information about CSTE can be found at www.cste.org.

ENVIRONMENTAL PUBLIC HEALTH MAPPING

*submitted by Lesa Roberts, MPH, BSN, RN
Environmental Health Officer*



Maps are powerful means of expressing complex information. With greater accessibility to mapping tools, environmental health professionals can integrate and locate data from national to census-block resolution. MassHEIS is an example of how mapping can enhance access at the community as well as research level. This web-based tool, developed by Silent Spring Institute in cooperation with the National Library of Medicine, assembles data pertaining to the Institute's Cape Cod Breast Cancer and Environment Study as well as other sources. Users can view preassembled maps or explore relationships of data of their own choosing. MassHEIS is a model for building environmental health mapping and data integration systems.

The KDHE Center for Public Health Preparedness' Environmental Health Hazards Work Group is examining data and creating maps that will help characterize the populations most likely to be affected by the top hazardous chemicals known to be in the state. KDHE GIS staff are compiling and mapping data for

this effort. By visualizing this data, the work group hopes to plan training of local health practitioners by providing toxicological training specific to local hazards.

EMERGENCY HAND CRANK AM/FM RADIO/FLASHLIGHT/CHARGER

submitted by Office of Local and Rural Health



Attendees of the 2007 School Nurse Conference were given an emergency hand crank AM/FM Radio/flashlight/charger by the Office of Local and Rural Health, Kansas Department of Health and Environment, through a schools' grant administered by the Heartland Center for Public Health Preparedness. If you are interested in purchasing a preparedness tool like this one for your agency, school, or family emergency kit it is available through Advancedmart at <http://store.advancedmart.com/> or other similar supply companies.



KRHIS SURVEY

submitted by Gloria Vermie

Director – Rural Health



Kansas Rural Health Information (KRHIS) users received a notice this week requesting completion of a short electronic survey. The site below will link you to the electronic survey. The survey results will assist with potential changes, enhancements, and improved services to you. Your time and effort with this request is appreciated. The survey will be closed after Aug. 10.

http://www.surveymonkey.com/s.aspx?sm=S9ya7MitCFkpKDxVrI9UzQ_3d_3d.

KRHIS is a service of the Kansas Department of Health and Environment, Office of Local and Rural Health (OLRH). This service allows you to register online to receive important information about rural health in Kansas through e-mail or fax. Information is also posted daily to a Web site that is open to the public. The service is free, and open to anyone interested in rural health.

Healthcare providers face information overload everyday. The Kansas Rural Health Information Service is designed to provide targeted information that is useful to you. When you register, you will choose what kind of information you want to receive from a range of categories. You can select as many or as few categories as you want, and to specify if you want to receive information via e-mail, fax or both.

For more information contact Gloria Vermie, Rural Health Program Director, at (785) 296-1200 or gvermie@kdhe.state.ks.us. Visit KRHIS at krhis.kdhe.state.ks.us to register today.

CORE TRAINING

*submitted by Stephanie Wick
KAHBH Operations Manager*



The Kansas All-Hazards Behavioral Health (KAHBH) program core training was developed by the KAHBH Team in 2005 and was based on a thorough review of disaster mental health literature and national resources. The information contained in the Core Training is considered to be the “national standard” of knowledge in the field, based on the pool of information gathered by the team and the Substance Abuse and Mental Health Services Administration/Community Mental Health Services (SAMHSA/CMHS) Core Crisis Counseling Training and Assistance Program (CCP) Model. The core training is continuously reviewed and updated on an annual basis, in order to continue to provide current and relevant information. The core training consists of seven modules based on information in the Federal Emergency Management Agency (FEMA)/CMHS Training Manual for Mental Health and Human Services Workers in Major Disasters.

- **Module 1:** KAHBH Program Overview
- **Module 2:** The FEMA/SAMHSA Crisis Counseling Assistance and Training Program & Behavioral Health and the All-Hazards Response System
- **Module 3:** Disaster Classifications and Phases
- **Module 4:** Traumatic Reactions to Disasters
- **Module 5:** KAHBH Community Outreach Teams: Structure, Procedures, and Documents
- **Module 6:** Providing Support During Disasters
- **Module 7:** Considerations for Special Populations, Cultural Competence, and Ethical Issues

The KAHBH Core Training is available on-line through KS TRAIN at <https://ks.train.org>, course #1008282. Trainers for the KAHBH Core Training are familiar with the FEMA/CMHS Crisis Counseling Program and have provided training that includes those core concepts. For further information contact Stephanie Wick at stephaniewick123@hotmail.com or (785) 313-5188.

END OF THE ROAD

Westerman Retires After 35 Years at County

*submitted by Alan Rusch
Ellsworth County Independent/Reporter*



Last Friday, July 20, friends and co-workers bid farewell during an open house for Pam Westerman, a 35-year employee of Ellsworth County Health Department. “It doesn’t seem real yet,” said Westerman. “I just decided it was time to let some of these younger people get involved. Public health is such a rewarding experience, and a few others need to have that experience.”

Looking back on her 35 years of service to Ellsworth County, Westerman said the real reward for her was doing just that - serving the public. “I just have a real love for people and to care for them,” she said. “I’ve met so many wonderful people over the years in the home and through the clinic. We serve so many people in all age ranges, and that has been a real reward to me.” In 1972, while working at Salina Regional Medical Center, Westerman received a call

from then Ellsworth County Health Nurse Chris Zouzas gauging her interest in working for the local health department. For Westerman, that call became the start of a 35-year public health service career. “I had no plans on doing that,” Westerman said. “But I had a new baby at home and not having to drive every day – it was just something I decided to take a look at, and I’ve been here ever since.”

Compared to healthcare workers elsewhere, Westerman said the health department staff works more independently. “We don’t have a physician on staff,” she said. “We have one that we can call. We see people from every walk of life that simply know this is a place they can come to.” When Westerman started, the Ellsworth County Health Department was located in two rooms at the county courthouse – rooms now occupied by the Ellsworth County attorney. Taking over as department administrator in 1977, Westerman oversaw perhaps the biggest challenge faced by that entity since then – moving from the courthouse in to the present

building on Alyward Ave in October 2000. "We just out-grew our space down there," she said. "It was a big change."

Westerman said she really doesn't have any specific plans in mind after she retires. "I just want to help my husband (Edward) farm and spend more time with my grandchildren," she said. "I plan to keep my nursing license, and I'll be glad to come in as a backup if they (the health department) need somebody on a short-term basis – I am not totally closing the door."

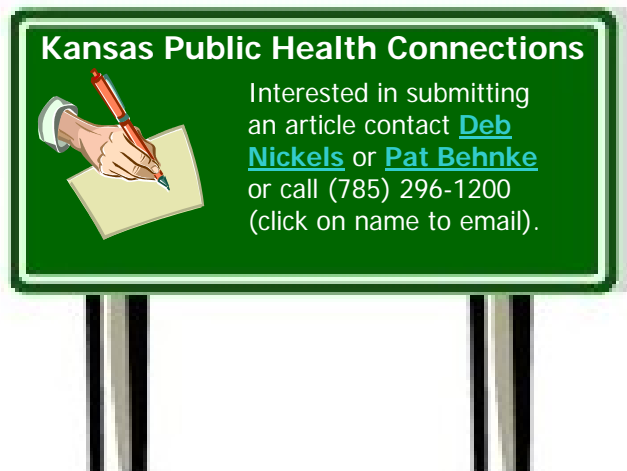
RETIRING AFTER 15 YEARS IN PUBLIC HEALTH

submitted by Franklin County Health Department

After 15 years in public health, Franklin County's Health Department Administrator Barbara Conus will be retiring in August. Barbara began by traveling to Anderson and Linn counties as the WIC nurse. In 1995 she began working in Ottawa as the WIC nurse and also in administration for the Franklin County Home Health agency, which was operated by the health department. In 1996, the home health agency was transferred to Ransom Memorial Hospital, as were all the employees. In 1998, Barbara returned to the Health department as the WIC nurse and has continued to work with WIC ever since. She was appointed to the health department director position in April 2001 when the previous director resigned.

Barbara believes her biggest accomplishment at the health department is raising the county's immunization rate from 67 percent in 2001 to a rate of 91 percent in 2006 for the primary series. "We are very proud of our rates," states Barbara. "We have also worked hard, on our relationship with the local physicians, to provide private pay immunizations to the county's children."

Barbara plans to spend more time with her husband who has been retired for four years now. She plans to do some traveling and catch up on her craft projects.



KPHLI SEEKING NEW APPLICANTS

*submitted by Theresa St.Romain
WALD Center, KUMC - Wichita*

The Kansas Public Health Leadership Institute is seeking applicants for its fifth training cycle. The year-long cycle will begin with an orientation session in connection with the Kansas Public Health Association conference in Wichita in September 2007.

The KPHLI provides competency-based leadership training to professionals in public health and allied fields from around the state. Through four quarterly training sessions, scholars hear renowned speakers and complete directed readings and reflective writings in consultation with a mentor. The training cycle culminates in the development and presentation of an applied public health capstone project.

Potential scholars must complete an application form and a biosketch/statement of interest and must provide a letter of professional recommendation. Full application instructions can be found on the KPHLI Web site in a pdf of the Cycle V application brochure, www.waldcenter.org/kphli/scholars.html#CycleV. For further information about the KPHLI application process, contact KPHLI Coordinator Theresa St.Romain at



tstromain@kumc.edu. Applications should be completed and submitted to Dr. Suzanne Hawley, KPHLI Co-Executive Director, no later than Aug. 3.

SILENT AUCTION TO AID GREENSBURG

submitted by Gloria Vermie

Director – Rural Health

Kansas Department of Health & Environment

The annual Kansas Public Health Association (KPHA) conference will hold a Silent Auction for KPHA Baskets Sept. 18-20 in Wichita. Proceeds from this year's auction will be used to support the recovery efforts of the Kiowa County Health Department in Greensburg. Baskets

should contain items that celebrate the state of Kansas with items produced locally, products featured in projects or programs, and fun and delicious items. This is a great opportunity to showcase your community, county or organization.

For more information contact Gloria Vermie, (785) 291-3796, or Alice Weingartner, (785) 368-2039.



KPHA ANNUAL FALL CONFERENCE

submitted by Elaine Schwartz, Executive Director

Kansas Public Health Association (KPHA)



The 2007 Annual Conference on September 19-20, focuses on *"Communicating our Message: Public Health, Policy, and Politics."* Janis Goedeke, President Elect/Conference Chair and Cyndi Treaster, Session Chair, along with Ed Kalas, Sonja Armbruster, Eldonna Chesnut, Melissa Armstrong, and Debbi Baugher, have all done a terrific job in designing the conference. There will be six general sessions and 12 breakout sessions to give you the opportunity to learn about all the activities within public health that work to communicate our message throughout Kansas. Over 150 people have already registered, so remember to register to meet the early bird deadline, and to get your room at a conference discount. Registration for non-members includes a one-year membership, free!

"Communicating our Message: Public Health, Policy, and Politics," don't miss it.

Click on www.kpha.us for the conference brochure and the registration materials. What makes a good conference are the attendees, networking, the great exhibits, and giveaways! This year KPHA will be presenting the 100-year celebration of the flyswatter, and the abolishment of the common cup. The Kansas Health Foundation will be giving away 100 video's, "Day in the Life of Public Health!" Many thanks to KHF for all their support for the KPHA Fall Conference!

Keynote speakers include:

"Public Health Law-the Highest Form of Policy and Politics," Judge Linda L. Chezem. Judge Chezem is a professor at Purdue University and has a part time appointment at the Indiana University School of Medicine in the Department of Medicine and Purdue School of Science - Indianapolis, Forensic Science Program, and is a senior research fellow of the Sagamore Institute. She has held appointments at Indiana University School of Law at Indianapolis, Indiana, and was an Affiliated Scholar with the Center for Public Health Law Partnerships at the University of Louisville School of Medicine. In 2001, through her service on the Morgan County, Indiana, Board of Health she recognized a compelling need for up to date materials and references for public health emergencies for the justice system.

Promoting the Health of the Public: Creating Political Will for Action, Dr. Debra Klein Walker, APHA President. Deborah Klein Walker, Ed.D. is a vice president in the health division at Abt Associates and president of the American Public Health Association. Formerly she worked at the Massachusetts Department of Public Health for 15 years where she most recently was the associate commissioner for programs and prevention responsible for programs in maternal and child health, health promotion and disease prevention (including the tobacco control

program), primary care and community health programs (including those for HIV/AIDS and substance abuse), minority health, data integration and information systems. Walker is a current trustee of the Cambridge Health Alliance and a co-founder of New England SERVE, an organization committed to quality services for children with special health care needs. She is currently an adjunct professor at the Boston University School of Public Health and an adjunct lecturer at the Harvard School of Public Health.

The Oklahoma City Bombing: Lessons Learned "A Family Members Perspective," Kenneth Thompson. Ken Thompson lost a loved one in the Oklahoma City bombing of the Alfred P. Murrah Federal Building. Thompson has first-hand experience, as a recipient of the expertise of the responder community during the aftermath.

Public Health Advocacy, Dr. Jack Thompson. Dr. Thompson has been with the University of Washington since 1999. He has served as the director of the Northwest Center for Public Health Practice. Prior to his appointment, he was employed by the Seattle-King County Department of Public Health for 10 years, and was the director of the Seattle Health Services Division since 1986. Prior to his lecturer and senior lecturer appointments, Thompson served as a clinical instructor in the Department of Health Services for six years.

PART-TIME HIV/STD NURSE



The Johnson County Public Health Department is seeking a part-time HIV/STD Nurse. The HIV/STD Nurse provides nursing assessment, counseling and education for women's/men's health clients for health issues; provides screening services and obtains laboratory specimens, evaluates findings of screening services and laboratory specimens, develops plan of care and makes appropriate referrals, dispenses medications and administers injection medications per protocol for women's/men's health clients; records data accurately and thoroughly in client's confidential medical records as documentation of services rendered, procedures performed and follow-up obtained; records accurate statistical data used to report program information; maintains knowledge base of all Family Health Services Programs

to determine client or staff needs and makes appropriate referrals to clinical services or other community providers; contributes to a smooth, functioning of Family Health Services through effective working relationships/communication with peers and public health department staff and provides assistance in other Family Health Services Programs as needed.

Requires an associate's degree in nursing; Bachelor's degree in nursing is preferred. With Associate's degree, must possess two years of nursing experience; one being in a public health nursing related field. Preferred qualifications: Bachelor's degree in nursing with one year of experience in a hospital, clinic or a public health setting. Requires a valid driver's license and must be a Registered Nurse in the state of Kansas. Position will require exposure to fumes and/or chemicals; must be able to lift 10-20 lbs; emergency essential position; travel required 10 percent of time. Interested applicants may send resume and cover letter to Stacy Barr, Recruiter; stacy.barr@jocogov.org or for complete details and to apply on-line, visit <http://hr.jocogov.org>; or fax resume to (913) 715-1419; or mail to: Johnson County Human Resources; 111 S. Cherry, Suite 2600; Olathe, KS 66061.

LINKS

Regional Public Health Meetings and Billing Workshops

Click on the **Public Health sign** to view dates, times, and locations of Regional Public Health meetings and Billing Workshops.



**LOCAL HEALTH SECTION
OFFICE OF LOCAL & RURAL HEALTH**

<p style="text-align: center;">Shirley Orr Director, Local Health 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-296-7100 Cell phone – 316-250-6940 Fax number 785-296-1231 E-mail address – sorr@kdhe.state.ks.us</p>	
<p>Jon Anderson PH Nurse Specialist 1500 W. 7th Chanute, KS 66720-9701 Office phone – 620-431-2390 Cell phone 785-231-9828 Fax number – 620-431-1211 E-mail address – janderso@kdhe.state.ks.us</p>	<p>Linda Frazier PH Workforce Development Coordinator/DLC 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-296-3641 Cell phone – 785-231-4504 Fax number – 785-296-1231 E-mail address – lfrazier@kdhe.state.ks.us</p>
<p>Vacant PH Nurse Specialist 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-296-1200 Cell phone – Fax number - 785-296-1231 E-mail address –</p>	<p>Debbie Nickels Kansas TRAIN Administrator 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-291-3457 Cell phone – 785-231-4503 Fax number – 785-296-1231 E-mail address – dnickels@kdhe.state.ks.us</p>
<p>Vacant Training Coordinator/PH Preparedness 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-296-1200 Cell Phone – Fax number – 785-296-1231 E-mail address –</p>	<p>Debbie Whitmer PH Nurse Specialist 2501-D Market Place Salina, KS 67401-7699 Office phone – 785-827-9639 Cell phone – 785-452-5986 Fax number – 785-827-1544 Email address – dwhitmer@kdhe.state.ks.us</p>